

MICHIGAN DEPARTMENT OF NATURAL RESOURCES - FISHERIES DIVISION

WEBSITE: www.michigan.gov/dnr

REPORT OF FISH, REPTILES, AMPHIBIANS, CRUSTACEANS, OR MOLLUSKS TAKEN UNDER A CULTURAL OR SCIENTIFIC COLLECTOR'S PERMIT

Required under authority of Act 451 of 1994, Part 487. Failure to report this information by the end of the permit year shall result in permit revocation.

NAME OF COLLECTOR (LAST, FIRST, MIDDLE)	YEAR
AFFILIATION	TELEPHONE NUMBER
ADDRESS (OFFICE)	FAX NUMBER
CITY, STATE, ZIP	E-MAIL ADDRESS:

Fill in below OR provide the information on a disk in an excel spreadsheet or access database. This form, with the top portion completed, must accompany all disks.

		NUMBEI	R				WATER & LOCATION
COMMON & SCIENTIFIC NAME OF SPECIES	D E A D	PT A L I V E	RELEASED	SIZE (Length, if one organism, or Range if more, in Inches)	TYPE OF GEAR USED	DAY & MONTH SAMPLED	WATER & LOCATION (Use <u>one</u> of the formats below.) 1) Great Lakes Basin, Watershed, Water Body, & Location 2) County, Township, Range, Section, & Water Body

Mail completed report to: FISHERIES DIVISION

DEPARTMENT OF NATURAL RESOURCES

BOX 30446

LANSING MI 48909-7946

REPORT OF FISH, REPTILES, AMPHIBIANS, CRUSTACEANS, OR MOLLUSKS TAKEN UNDER A CULTURAL OR SCIENTIFIC COLLECTOR'S PERMIT (Continued)

		NUMBER					
COMMON & SCIENTIFIC NAME OF SPECIES	D E A D	PT A L I V E	R E L E A S E D	SIZE (Length, if one organism, or Range if more, in Inches)	TYPE OF GEAR USED	DAY & MONTH SAMPLED	WATER & LOCATION (Use one of the formats below.) 3) Great Lakes Basin, Watershed, Water Body, & Location 4) County, Township, Range, Section, & Water Body

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